



Healthy Homes  
Healthy Children

# Lead Update

## Refugee Data Reveal Need for Improved Screening

On December 6, 2004, the Centers for Disease Control and Prevention issued an urgent letter to the Childhood Lead Poisoning Prevention Program Managers in the United States, notifying programs that a number of children newly arrived from Africa were identified with elevated blood lead levels.

In response to this urgent letter, HEALTH ran an initial data match between the Lead Elimination Surveillance System (LESS) database and HEALTH's Refugee Health database to establish baseline lead screening rates of African refugee children who had arrived in Rhode Island in the last three years.

A total of 77 African refugees were included in the data set. Initial results revealed:

- Forty-six refugee children (59.7%) had received a lead screening since their arrival in Rhode Island.
- Thirty-one refugee children (40.3%) had never received a lead screening.
- Sixteen of the children screened for lead poisoning (34.8%) had blood lead levels above 10 mcg/dL at their initial screening.
- Nine children (19.6%) had blood lead levels above 15 mcg/dL at their initial lead screening.
- 100% of children referred to one of Rhode Island's four lead centers accepted case management services.

These initial results reveal that Rhode Island needs to improve screening rates among refugee children. Additionally, the fact that 34.8% of the children had an elevated blood lead level at the time of their first screening indicates that culturally and linguistically appropriate prevention and education will be key components to reducing lead poisoning among refugees. HEALTH will be working to improve lead screening among refugees through the following initiatives:

- Collaborating with the Refugee Health Program to cross-check the Lead Elimination Surveillance System (LESS) database with the Refugee Health database to verify that all refugee children are screened within thirty days of arrival in Rhode Island and that they receive follow-up screening or case management in a timely manner.
- Working closely with health care providers to alert them of new blood lead screening guidelines for refugee children.
- Collaborating with the three RI Refugee Resettlement Agencies to develop appropriate primary prevention and educational strategies.

If you have any questions about this initiative, please contact Ruth Lindberg at (401) 222-7681 or [RuthL@doh.state.ri.us](mailto:RuthL@doh.state.ri.us).

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## PRODUCT WATCH

The following products may contain a dangerous amount of lead:

- Toy Jewelry in vending machines ([www.toyjewelryrecall.com](http://www.toyjewelryrecall.com))
- Lucas Limon® • Lucas Acidito®
- Super Lucas®
- Super Jovy Chili Powder®

## HEALTH Prepares to Monitor Trends In Lead Safe, Affordable Housing

In early January, HEALTH hosted two students from the Harvard School of Public Health who assisted in the development of strategies to monitor Rhode Island's progress on its *Plan to Eliminate Childhood Lead Poisoning by 2010*. As defined in the Elimination Plan, Rhode Island's goal is "to decrease the proportion of new cases of lead poisoning in children under six years of age to less than 5% in all Rhode Island communities without decreasing the availability of lead safe and affordable housing." Evaluating the housing portion of this elimination goal has been, and will continue to be, a challenge for HEALTH as housing data are not collected by one designated or centralized agency in Rhode Island. Additionally, gathering new data or compiling multiple forms of data will require intensive resources and time. However, the Harvard students outlined a number of strategies using existing data sources that will help to develop an evaluation measure to monitor trends in lead safe, affordable housing in Rhode Island. A subgroup of individuals from HEALTH's advisory committee have agreed to collaborate and outline a strategy that will be both feasible and useful as we move forward in the implementation of the Elimination Plan. If you have questions about or would like to become involved in this initiative, please contact Daniela Quilliam at (401) 222-7730 or [DanielaQ@doh.state.ri.us](mailto:DanielaQ@doh.state.ri.us).

### DHS Redistributes Lead Center Referrals

Effective February 1, 2005, lead poisoned children in Rhode Island will be referred to one of the four Certified Lead Centers through a modified referral distribution process. The Department of Human Services (DHS), HEALTH, and the four Lead Centers agreed that a more equitable distribution of referrals among the four Lead Centers would help to sustain quality case management services provided by each of the Lead Centers. The Lead Centers will now be servicing the following areas:

Certified Lead Center	Service Area	Contact
Blackstone Valley Community Action Lead Center (BVCAP)	Burrillville, Cumberland, Gloucester, Lincoln, Pawtucket, North Smithfield, Smithfield, Woonsocket	723-4520 x 234
Family Service of RI Lead Center	Barrington, Bristol, Central Falls, East Providence, Foster, Jamestown, Johnston, Little Compton, Middletown, Newport, North Providence, Portsmouth, Scituate, Tiverton, Warren	639-3949
St. Joseph Hospital Lead Safe Center	Providence	421-8525
West Bay Community Action Lead Center	Charlestown, Coventry, Cranston, East Greenwich, Exeter, Hopkinton, Narragansett, New Shoreham, North Kingstown, Richmond, South Kingstown, Warwick, Westerly, West Greenwich, West Warwick	732-4660 x 117

The Lead Centers continue to offer quality case management services to significantly lead poisoned children in Rhode Island (venous blood test  $\geq 20$  mcg/dL or persistent  $\geq 15$  mcg/dL) and children with a single venous test of 15-19 mcg/dL. If you have any questions about the new referral distribution, contact Jodie Garnetto at (401) 222-4634 or [JodieS@doh.state.ri.us](mailto:JodieS@doh.state.ri.us).

### Rhode Island Is Prepared for the Lead Hazard Mitigation Law

The Lead Hazard Mitigation Law takes effect in Rhode Island on July 1, 2005. Key state and local agencies such as the Housing Resources Commission, HEALTH, the Department of the Attorney General, and the Department of Business Regulations have dedicated a tremendous amount of work to ensure that property owners, tenants, and the general public are adequately equipped to comply with the Law. Over 6,000 property owners had already taken the three-hour Lead Hazard Awareness Class by the end of December 2004, and Certificates of Conformance have been proactively issued for over 300 housing units. The Interagency Council on Environmental Lead issued a report on February 28, 2005 to Governor Donald L. Carcieri detailing Rhode Island's preparedness for the Law. A copy of this report is available at [www.health.ri.gov/](http://www.health.ri.gov/)